Pain with Pregnancy and After Delivery
Being pregnant and having a new baby can be a wonderful experience, but it is not always free of pain. Women may experience pain in different ways. This can be mild discomfort to severe pain. There are many medications to treat pain. The goal, especially when you are pregnant, is to keep you and your baby’s exposure to medications and drugs as low as possible.

This booklet will provide you with tools to improve your comfort during and after pregnancy. Our goal is to decrease your need for medications and drugs that could affect the health of you and your baby.

**PAIN RELIEF DURING PREGNANCY**

**Sciatica**

Sciatica happens when a large nerve, which runs through the joint between the tail bone and the hip bone, is compressed. This can cause shooting pain down the leg and can happen on either side of your body. Sometimes, it may cause weakness and can get worse as pregnancy progresses. The following comfort measures may help you manage the pain:

- **Apply ice to the joint in the low back, located at the dimples on either side of the spine.**
- **Try over the counter medications such as Acetaminophen (Tylenol).**
- **Ask your provider for instructions for stretches called pelvic tilt exercises.**
- **Ask your provider about alternative pain meds.**

To help prevent sciatica:

- **Use good posture and lower back support while sitting.**
- **Wear shoes with good arch support**
- **Try not to carry heavy bags on the same shoulder all the time.**

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To help prevent sciatica:

- **Use good posture and lower back support while sitting.**
- **Wear shoes with good arch support**
- **Try not to carry heavy bags on the same shoulder all the time.**
• Practice exercises that strengthen your core or stomach muscles, including yoga, swimming and pelvic tilt exercises.

If the pain does not resolve, seek help from your provider. You may also ask your provider if chiropractic care is right for you.

Public Bone Pain

This discomfort may range from a nagging ache to a sharp pain. It is located in the center of the pubic bone and may be worse when walking or lifting.

• Sleeping with a pillow between your legs can provide comfort.
• Ice can help for a short time along with rest.
• Acetaminophen (Tylenol).

Edema

Edema is the swelling of the skin of the legs and feet, which is common in late pregnancy. It can be worse if standing or sitting for long periods, eating salty foods or in the heat of the summer.

• Rest on your side, on a bed or couch for 40 minutes, after work and dinner.
• Avoid salty foods and drinks, such as Gatorade, unless your provider recommends them.
• Swimming, water aerobics or relaxing in a swimming pool may also help.

Headache

Migraine: If you have migraine headaches with your periods, they may become worse at the beginning of your pregnancy. This is when nausea and fatigue are common. They usually improve in the second trimester. If migraines continue or get worse in middle to late pregnancy, you may try:
• Increase water intake to ½ gallon a day
• Acetaminophen (Tylenol) along with a caffeine drink such as soda, tea or coffee
• Resting in a dark room

If these tips do not help, ask your provider about other options.

**Tension:** If your headache is not like a typical migraine with light sensitivity, nausea and sometimes a warning “aura”, you may have a tension headache. This type of headache feels like the top of your head is being compressed, from your forehead to the back of your head. It may also include a tight neck and shoulder muscles.

• Increase water to at least ½ gallon a day
• Acetaminophen (Tylenol) and rest
• Using an ice pack and then a hot pack, each 15 minutes, on the back of your head/neck until you feel the muscle tension relax
• Massage and stretching the neck and shoulder muscles can help keep the headache from returning.
• Ask provider for alternative pain meds
• Magnesium daily

If your tension headache returns often, you may want to look at your workspace for good body mechanics.

**PAIN RELIEF AFTER DELIVERY**

Three types of pain are common after delivering a baby.

• Incision pain from C-Section
• Pain from a tear or episiotomy
• Uterine cramping

NSAID (nonsteroidal anti-inflammatory), Ibuprofen, Motrin or Advil, medications help relieve pain. They do this by decreasing swelling and blocking chemicals that make muscles sore. For many kinds of pain,
NSAIDS provide better pain relief with fewer side effects than narcotics. NSAIDS are available over the counter.

C-Section Incisional Pain

- C-Section pain is usually most intense in the first few days after surgery, but it becomes less over time.
- An abdominal support binder can help support your stomach. This may help your incision not tug or pull so much when you move, breathe deeply or cough. This can reduce your pain.
- Often around-the-clock scheduled doses of NSAIDS can decrease the need for narcotic pain medications.

Episiotomy/Laceration

- This pain can be improved with an ice pack placed to the sore area. Try this for at least 24 hours
- NSAIDS can help decrease pain and swelling
- Using warm water in a squirt bottle called a peri bottle can help as well
  Fill the bottle with warm water each time you go to the bathroom
  Run the warm water over the sore area as you urinate
- You may want to use a stool softener or laxative to keep from having to strain and push against the stitches

Uterine Contraction/Cramping/After Delivery

- This pain can be controlled with NSAIDS
- NSAIDS are more effective and have fewer side effects for this kind of pain than narcotics.
- Move around and use heat to your abdomen, such as a heating pad or rice bag
- Your uterus may cramp more intensely when breastfeeding your baby. Staying on a steady dose of NSAIDS may help to avoid an increase in pain while breastfeeding

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If you are experiencing consistent pain, try a dose of NSAID unless you are allergic or have other medical issues.

- If you take this medication around the clock, a lot of your pain can be controlled.
- Keep taking the NSAID on a schedule, for at least a week
- Use narcotic medications such as Norco, Percocet, etc., only as you need them to be able to move around and care for yourself and your baby
- Some pain is part of the normal healing process. If you are able to avoid or take minimal narcotic medications for your pain, your recovery, as well as breastfeeding, will be easier.
- When needed, try taking only one tablet of the narcotic to see what the side effect is before taking two pills.
- Each person responds differently to narcotics
- If you are taking the scheduled NSAID, you may not need much of the narcotic.
- NSAIDS are better at controlling the cause of pain for an episiotomy and cramping

The side effects of narcotics may include an upset stomach, not wanting to eat, dizziness, difficulty having a bowel movement, slow reflexes and feeling sleeping. These side effects can affect your ability to care for your baby. In addition, your baby can get some of your medication through your breastmilk, which can make the baby sleepier and cause poor feeding. It is important not to drive until you are no longer taking ANY narcotics.

We hope you have found some comfort measures to use during your pregnancy and recovery. However, many of these suggestions can be used in all parts of your life. Please make sure to discuss any pain or discomfort you are having with your provider.